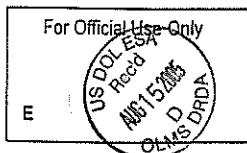


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>8139</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>04</u> Through: <u>12</u> / <u>31</u> / <u>04</u>
3. Name and address of person filing. Name <u>Steven</u> <u>M</u> <u>Lewsader</u> P.O. Box, Bldg., Room No., if any _____ Street <u>131 19th Avenue N</u> City <u>South St. Paul</u> State <u>Minnesota</u> ZIP Code + 4 <u>55075-1845</u>	4. Name, file number, and address of labor organization. Name <u>Communications Workers of America</u> <u>Local 7201</u> Labor Organization File Number <u>000.188</u> P.O. Box, Building and Room Number, if any <u>Suite 6</u> Street <u>225 E Roselawn Avenue</u> City <u>St. Paul</u> State <u>Minnesota</u> ZIP Code + 4 <u>55117-1944</u>
5. Position in labor organization. _____	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Qwest Communications</u> Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street <u>1801 California</u> City <u>Denver</u> State <u>Colorado</u> ZIP Code + 4 <u>80202-2638</u>	7.a. Nature of Interest, Transaction, or Income. <u>See Attached</u> 7.b. Amount. <u>See Attached</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Steven M Lewsader</u>	On <u>8/11/05</u> <u>651 774-7201</u> Date Telephone Number

Steven Michael Lewsader
End date of reporting period December 31, 2004

PART A ATTACHMENT

6. Employer

Qwest Communications
1801 California
Denver, Colorado 80202-2638

7a.

7b.

1)
Expenses for CWA/Qwest Mutual Occupational
Safety and Health Committee In Golden, Colorado
Sponsored by the Company
4/20 thru 4/23, 2004

Airfare from Mpls/St. Paul to Denver Roundtrip	\$224
Hotel Room in Golden, Colorado (3 Nights)	\$286
Meals	\$153

6. Employer

Qwest Communications
1801 California
Denver, Colorado 80202-2638

7a.

7b.

1)
Expenses for CWA/Qwest Mutual Occupational
Safety and Health Committee In Des Moines, Iowa
Sponsored by the Company
6/1 and 6/2, 2004

Car Rental Mpls/St. Paul to Des Moines Round Trip	\$150
Hotel Room in Des Moines, Iowa (1 Night)	\$146
Meals	\$ 34